

## FEE TRANSMITTAL

Electronic Version v08

Stylesheet Version v08.0

<b>Title of Invention</b>	Methods of Treating a Silicon Carbide Substrate for Improved Epitaxial Deposition and Resulting Structures and Devices																						
Application Number :																							
Date :																							
First Named Applicant:		Davis Andrew McClure																					
Attorney Docket Number:		5000.238A																					
<b>TOTAL FEE AUTHORIZED \$ 1608</b>																							
Patent fees are subject to annual revisions on or about October 1st of each year.																							
Filing as large entity																							
BASIC FILING FEE																							
<table border="1"><thead><tr><th>Fee Description</th><th>Fee Code</th><th>Amount \$</th><th>Fee Paid \$</th></tr></thead><tbody><tr><td>Utility Filing Fee</td><td>1001</td><td>770</td><td>770</td></tr><tr><td colspan="3"></td><td>Subtotal For Basic Filing Fees: \$ 770</td></tr></tbody></table>				Fee Description	Fee Code	Amount \$	Fee Paid \$	Utility Filing Fee	1001	770	770				Subtotal For Basic Filing Fees: \$ 770								
Fee Description	Fee Code	Amount \$	Fee Paid \$																				
Utility Filing Fee	1001	770	770																				
			Subtotal For Basic Filing Fees: \$ 770																				
EXTRA CLAIM FEES																							
<table border="1"><thead><tr><th>Fee Description</th><th>Extra Claim</th><th>Fee Code</th><th>Amount \$</th><th>Fee Paid \$</th></tr></thead><tbody><tr><td>Total Claims : 57</td><td>37</td><td>1202</td><td>18</td><td>666</td></tr><tr><td>Independent Claims : 5</td><td>2</td><td>1201</td><td>86</td><td>172</td></tr><tr><td colspan="3"></td><td colspan="2">Subtotal For Extra Claims Fees: \$ 838</td></tr></tbody></table>				Fee Description	Extra Claim	Fee Code	Amount \$	Fee Paid \$	Total Claims : 57	37	1202	18	666	Independent Claims : 5	2	1201	86	172				Subtotal For Extra Claims Fees: \$ 838	
Fee Description	Extra Claim	Fee Code	Amount \$	Fee Paid \$																			
Total Claims : 57	37	1202	18	666																			
Independent Claims : 5	2	1201	86	172																			
			Subtotal For Extra Claims Fees: \$ 838																				
<b>AUTHORIZED BILLING INFORMATION</b>																							
<b>The commissioner is hereby authorized to charge indicated fees and credit any overpayments to:</b>																							
Credit account number:		1001																					
Expiration Date (YYYYMMDD):		2004-07-31																					
Authorized name:		Philip Summa																					
Billing address:		28277																					